Green County Department of Land Conservation

1627 4th Avenue West Monroe, WI 53566 608-325-4195 ext120 Fax 608-329-4894

WELL PERMIT APPLICATION

(INFORMATION TO BE COMPLETED BY THE APPLICANT)

A diagram of the site (**not less than 8 1/2 by 11 inches**) and shall include the location of all structures, all other wells (used or unused) and sources of water, septic tanks, septic absorption fields, underground fuel storage tanks, animal yards and other sources of contamination; at least one property line, North arrow, the property access road and nearest public road. Distances shall be provided by dimension or to scale. For large parcels (>10 acres) the plan must include a small scale diagram showing all property lines and adjacent roads in addition to the large scaled diagram showing site details.

ne Number	Site Development Plan								
	Building Plan attac	ched	or	Sanitary Plan A	Attached	or	Other		
	Well Location	Town		City	Village				
	OF								
Zip Code	Well Street Address					Fire No. (If Available)		
	Subdivision Name or	Certified	Survey M	ap No:		Lot No.	Block No.		
nstruction									
	Tax Parcel No. (If av	ailable)			ı				
Other									
			GPS Coordinates (Lat/Long dea/dec m):						
	GFS Coordinates (Lat/Long deg/dec.m)N								
indoned:	Government Lot No OR								
	1/4 of1/4 of Section; TN; RE								
correct to the best	Well Constructor (Pri	int)			L	icense No.			
	Comments:								
FOR COUNTY USE									
	Zip Code Instruction Other Indoned: Forrect to the best	Building Plan atta Well Location OF Zip Code Well Street Address Subdivision Name or Instruction Tax Parcel No. (If av Other GPS Coordinates (La Government Lot No. 1/4 of correct to the best Well Constructor (Prince) Comments:	Building Plan attached Well Location Town OF Zip Code Well Street Address Subdivision Name or Certified astruction Tax Parcel No. (If available) Other GPS Coordinates (Lat/Long degree Legent Lot No Government Lot No1/4 of1/4 of Sometic to the best Well Constructor (Print) Comments:	Building Plan attached Well Location Town OF Zip Code Well Street Address Subdivision Name or Certified Survey M astruction Tax Parcel No. (If available) GPS Coordinates (Lat/Long deg/dec.m):E Government Lot No OI1/4 of1/4 of Section correct to the best Well Constructor (Print) Comments:	Building Plan attached Or Sanitary Plan A Well Location Town City OF	Building Plan attached Or Sanitary Plan Attached Well Location Town City Village OF	Building Plan attached or Sanitary Plan Attached or Well Location Town OF Well Location Town City Village Zip Code Well Street Address Fire No. (Subdivision Name or Certified Survey Map No: Lot No. Subdivision Name or Certified Survey Map No: Lot No. Tax Parcel No. (If available) GPS Coordinates (Lat/Long deg/dec.m):		

Date Received	DNR Variance	Floodplain Delineation	Flood Protection Elevation		
	Approved	Floodway	ft./msl		
	Disapproved	Floodfringe			
Permit Fee	Requested	Other	~Surface Evevation of Well		
Paid Not Paid	Not Required		ft./msl		
County Well Permit No.		Special Well Casing Requirements:	Yes No		
		Distance to nearest Landfill:	ft		
Permit Application is: Granted Denied		Comments:			
Permit shall remain valid until:					
Signature of Permitter					
DateSigned					